Substitute for form 1449/PTO				Complete if Known		
Revised 07	/2007)			Application Number	10/792,175	
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INFORMATION DISCLOSURE				First Named Inventor	Finke-Anlauff et al.	
STATEMENT BY APPLICANT (Use as many sheets as necessary)				Art Unit	2175	
				Examiner Name	K. D. Vu	
Sheet	1	of	- 8	Attorney Docket Number	042933/275300	

		FOREI	GN PATENT D	OCUMENTS			
Examiner Initials*	Cite No.	Foreign Patent Document  Country Code - Number Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	English Language Translation Attached	
		*Abstract only					
		C	THER DOCUM	IENTS			
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/T.H.	/ 164	Office Action for EU Appl.	No. 04 026 849.2	dated October 19, 2006			
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/T.H.	/ 169	Decision to Refuse Application for Application No. EU 04 026 849.2 dated November 29, 2010					
/T.H.	/ 170	Brief Communication – Summary of Facts and Submissions for Application No. EU 04 026 849.2 dated November 29, 2010					

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Examiner		Date	04/40/0044
Signature	/ I adesse Hailu/	Considered	01/10/2011

<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Submittal Date: December 10, 2010